State of Minnesota	District Court
County	Judicial District:
	Court File Number:
	Case Type:
Petitioner / Plaintiff	-
and / vs	Affidavit of Service
Respondent / Defendant	
STATE OF MINNESOTA	
COUNTY OF	
(County where Affidavit signed)	_
T	state that I am at least 10 years of age
(Name of person who hand delivered or mailed docume	, state that I am at least 18 years of age
having been born on	, and that on(Date of Service)
I served the following documents, namely	· · · · · · · · · · · · · · · · · · ·
Detti ann / Dia	(Title of Documents hand delivered or mailed)
upon (check one) Petitioner / Plain	tiff Respondent / Defendant
Service was done as follows: (check all that app	ly)
Personal service: By handing a true and correct copy of the documents to	
Tersonal service. By handing a true and c	eorrect copy of the documents to
☐ Mail service: By mailing a true and corre	ect copy of the documents by first class mail to
(name)	at his/her last known address
street address city and depositing the envelope, with sufficient to	state zip code postage, in the U.S. Mail at a postal box located in
· · ·	, State of
•	
	erything I have stated in this document is true and
correct. Minn. Stat. § 358.116.	
Dated:	
Buted.	Signature
	Name:
	Address:
	City/State/Zip:
	Telephone: ()
	E-mail address: